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During the **past 4 weeks**, have you had any of the following problems with your work or other regular daily activities **as a result of any emotional problems** (such as feeling depressed or anxious)?

Cut down the **amount of time** you spent on work or other activities

- ☐ Yes
☐ No

Accomplished less than you would like

- ☐ Yes
☐ No

Didn't do work or other activities as carefully as usual

- ☐ Yes
☐ No

During the **past 4 weeks**, to what extent has your physical health or emotional problems interfered with your normal social activities with family, friends, neighbors, or groups?

- ☐ Not at all ☐ Slightly ☐ Moderately ☐ Quite a bit ☐ Extremely

How much **bodily** pain have you had during the **past 4 weeks**?

- ☐ None ☐ Very mild ☐ Mild ☐ Moderate ☐ Severe ☐ Very severe

During the **past 4 weeks**, how much did **pain** interfere with your normal work (including both work outside the home and housework)?

- ☐ Not at all ☐ A little bit ☐ Moderately ☐ Quite a bit ☐ Extremely

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